

**United States Bankruptcy Court  
Eastern District of New York**

In re **MRI RESOURCES, INC.**,  
Debtor

Case No. **09-77791**

Chapter **11**

## SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	YES	1	\$ 0.00		
B - Personal Property	YES	3	\$ 1,835,356.48		
C - Property Claimed as Exempt	NO				
D - Creditors Holding Secured Claims	YES	3		\$ 0.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	YES	3		\$ 0.00	
F - Creditors Holding Unsecured Nonpriority Claims	YES	10		\$ 661,045.15	
G - Executory Contracts and Unexpired Leases	YES	1			
H - Codebtors	YES	2			
I - Current Income of Individual Debtor(s)	NO	0			\$
J - Current Expenditures of Individual Debtor(s)	NO	0			\$
<b>TOTAL</b>		<b>23</b>	<b>\$ 1,835,356.48</b>	<b>\$ 661,045.15</b>	

In re: MRI RESOURCES, INC.  
Debtor

Case No. 09-77791  
(if known)

SCHEDULE A - REAL PROPERTY

DESCRIPTION AND LOCATION OF PROPERTY	NATURE OF DEBTOR'S INTEREST IN PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION	AMOUNT OF SECURED CLAIM
Total >			0.00	
(Report also on Summary of Schedules.)				

In re MRI RESOURCES, INC.Case No. 09-77791

Debtor

(If known)

**SCHEDULE B - PERSONAL PROPERTY**

TYPE OF PROPERTY	NONE	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
1. Cash on hand	<b>X</b>			
2. Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.	<b>X</b>			
3. Security deposits with public utilities, telephone companies, landlords, and others.	<b>X</b>			
4. Household goods and furnishings, including audio, video, and computer equipment.	<b>X</b>			
5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	<b>X</b>			
6. Wearing apparel.	<b>X</b>			
7. Furs and jewelry.	<b>X</b>			
8. Firearms and sports, photographic, and other hobby equipment.	<b>X</b>			
9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	<b>X</b>			
10. Annuities. Itemize and name each issuer.	<b>X</b>			
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	<b>X</b>			
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	<b>X</b>			
13. Stock and interests in incorporated and unincorporated businesses. Itemize.	<b>X</b>			
14. Interests in partnerships or joint ventures. Itemize.	<b>X</b>			
15. Government and corporate bonds and other negotiable and nonnegotiable instruments.	<b>X</b>			
16. Accounts receivable.		<b>GROSS RECEIVABLES</b>		<b>54,977.83</b>
17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	<b>X</b>			
18. Other liquidated debts owed to debtor including tax refunds. Give particulars.	<b>X</b>			

In re MRI RESOURCES, INC.Case No. 09-77791

Debtor

(If known)

**SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

TYPE OF PROPERTY	NONE	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	<b>X</b>			
20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	<b>X</b>			
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	<b>X</b>			
22. Patents, copyrights, and other intellectual property. Give particulars.	<b>X</b>			
23. Licenses, franchises, and other general intangibles. Give particulars.	<b>X</b>			
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	<b>X</b>			
25. Automobiles, trucks, trailers, and other vehicles and accessories.	<b>X</b>			
26. Boats, motors, and accessories.	<b>X</b>			
27. Aircraft and accessories.	<b>X</b>			
28. Office equipment, furnishings, and supplies.		<b>MISC. OFFICE EQUIPMENT</b>		<b>208,277.95</b>
		<b>NOTE: VALUE OF FURNITURE IS SCHEDULED AT COST, AND IS SUBJECT TO APPRAISAL BY A COURT OF COMPETENT JURISDICTION.</b>		
29. Machinery, fixtures, equipment and supplies used in business.		<b>MEDICAL EQUIPMENT</b>		<b>1,558,850.22</b>
		<b>NOTE: VALUE OF EQUIPMENT IS SCHEDULED AT COST, AND IS SUBJECT TO APPRAISAL BY A COURT OF COMPETENT JURISDICTION.</b>		
30. Inventory.		<b>CONTRAST MEDIA</b>		<b>2,563.73</b>
		<b>NOTE: VALUE IS SCHEDULED AT COST. MARKET VALUE IS SUBJECT TO APPRAISAL BY A COURT OF COMPETENT JURISDICTION.</b>		
Inventory.		<b>FILM</b>		<b>2,000.72</b>

In re MRI RESOURCES, INC.Case No. 09-77791

Debtor

(If known)

## SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

TYPE OF PROPERTY	NONE	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
		<b>NOTE: VALUE OF FILM INVENTORY IS SCHEDULED AT COST. MARKET VALUE IS SUBJECT TO APPRAISAL BY A COURT OF COMPETENT JURISDICTION.</b>		
Inventory.		<b>MEDICAL SUPPLIES</b>		<b>8,686.03</b>
		<b>NOTE: VALUE IS SCHEDULED AT COST. MARKET VALUE OF MEDICAL SUPPLIES INVENTORY IS SUBJECT TO APPRAISAL BY A COURT OF COMPETENT JURISDICTION.</b>		
31. Animals.	<b>X</b>			
32. Crops - growing or harvested. Give particulars.	<b>X</b>			
33. Farming equipment and implements.	<b>X</b>			
34. Farm supplies, chemicals, and feed.	<b>X</b>			
35. Other personal property of any kind not already listed. Itemize.	<b>X</b>			
<u>2</u> continuation sheets attached			Total	<b>\$1,835,356.48</b>

(Include amounts from any continuation sheets attached. Report total also on Summary of Schedules.)

In re MRI RESOURCES, INC.  
Debtor

Case No. 09-77791  
(If known)

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

☐ Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER (See Instructions, Above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO.	X				X	0.00	0.00
CIT HEALTHCARE LLC AS ADMINISTRATIVE AGENT 305 FELLOWSHIP RD SUITE 300 MOUNT LAUREL, NJ 08054  JOHN J. PRIBISH BLANK ROME LLP 405 LEXINGTON AVENUE 10174		VALUE \$0.00					
NOTE: CIT OBLIGATION IS SET FORTH ON SCHEDULE D TO THE PETITION OF SONIX MEDICAL RESOURCES. MRI RESOURCES, INC. IS A GUARANTOR OF THE CIT OBLIGATION.							
ACCOUNT NO.	X				X	0.00	0.00
DVI CAPITAL COMPANY 6611 ROCKSIDE RD SUITE 110 INDEPENDENCE, OH 44131		VALUE \$0.00					
ACCOUNT NO.					X	0.00	0.00
GENERAL ELECTRIC CAPITAL CORP PO BOX 414 MILWAUKEE, WI 53201		VALUE \$0.00					

2 continuation sheets attached

Subtotal >  
(Total of this page)

Total >  
(Use only on last page)

\$ 0.00	\$ 0.00
\$	\$

(Report also on Summary of Schedules) (If applicable, report also on Statistical Summary of Certain Liabilities and Related Data.)

In re MRI RESOURCES, INC.  
Debtor

Case No. 09-77791  
(If known)

**SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER (See Instructions, Above.)	CODEBTOR	HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO.						X	0.00	0.00
GENERAL ELECTRIC COMPANY PO BOX 414 MILWAUKEE, WI 53201			VALUE \$0.00					
ACCOUNT NO.						X	0.00	0.00
HITACHI CAPITAL AMERICA CORP. 800 CONNECTICUT AVE. NORWALK, CT 06854			VALUE \$0.00					
ACCOUNT NO.						X	0.00	0.00
IMAGING FINANCIAL SERVICES, INC. 100 KINGS HIGHWAY S. ROCHESTER, NY 14617			VALUE \$0.00					
ACCOUNT NO.	X					X	0.00	0.00
ROCKFORD INDUSTRIES, INC. 1851 E. 1ST STREET SUITE 600 SANTA ANA, CA 92705			VALUE \$0.00					
ACCOUNT NO.						X	0.00	0.00
U.S. BANK TRUST NA AS CUSTODIAN OR TRUSTEE 180 5TH STREET E. ST. PAUL, MN 55101			VALUE \$0.00					

Sheet no. 1 of 2 continuation  
sheets attached to Schedule of  
Creditors Holding Secured  
Claims

Subtotal >  
(Total of this page)

Total >  
(Use only on last page)

\$	0.00	\$	0.00
\$		\$	

(Report also on Summary of Schedules) (If applicable, report also on Statistical Summary of Certain Liabilities and Related Data.)

In re MRI RESOURCES, INC.

Case No. 09-77791

Debtor

(If known)

**SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER (See Instructions, Above.)	CODEBTOR	HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO.								
US BANK TRUST NA 60 LIVINGSTON AVENUE ST. PAUL, MN 55107			VALUE \$0.00			X	0.00	0.00

Sheet no. 2 of 2 continuation sheets attached to Schedule of Creditors Holding Secured Claims

Subtotal >  
(Total of this page)

Total >  
(Use only on last page)

\$	0.00	\$	0.00
\$	0.00	\$	0.00

(Report also on Summary of Schedules) (If applicable, report also on Statistical Summary of Certain Liabilities and Related Data.)



In re MRI RESOURCES, INC.

Debtor

Case No. 09-77791

(If known)

**SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS**☐ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets.)

☐ **Domestic Support Obligations**

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

☐ **Extensions of credit in an involuntary case**

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

☐ **Wages, salaries, and commissions**

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,950\* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

☐ **Contributions to employee benefit plans**

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

☐ **Certain farmers and fishermen**

Claims of certain farmers and fishermen, up to \$5,400\* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

☐ **Deposits by individuals**

Claims of individuals up to \$2,425\* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

☒ **Taxes and Certain Other Debts Owed to Governmental Units**

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

☐ **Commitments to Maintain the Capital of an Insured Depository Institution**

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).

☐ **Claims for Death or Personal Injury While Debtor Was Intoxicated**

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

\* Amounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

**2 continuation sheets attached**

In re MRI RESOURCES, INC.  
Debtor

Case No. 09-77791  
(If known)

**SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS**  
(Continuation Sheet)

Type of Priority: Taxes and Certain Other Debts Owed to Governmental Units

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
ACCOUNT NO.  INTERNAL REVENUE SERVICE PO BOX 21126 PHILADELPHIA, PA 19114							0.00	0.00	\$0.00
ACCOUNT NO.  NYS DEPARTMENT OF TAX & FINANCE BANK/SPECIAL PROC. PO BOX 5300 ALBANY, NY 12205-0300  NYS DEPT. OF TAX & FINANC COLLECTION & ENFORCEMENT 80-02 KEW GARDENS RD KEW GARDENS, NY 11415							0.00	0.00	\$0.00

Subtotals >  
(Totals of this page)

\$	0.00	\$	0.00	\$	0.00
\$	0.00				
		\$	0.00	\$	0.00

Total >  
(Use only on last page of the completed  
Schedule E. Report also on the Summary of  
Schedules.)

Total >  
(Use only on last page of the completed  
Schedule E. If applicable, report also on the  
Statistical Summary of Certain Liabilities and  
Related Data. )

In re MRI RESOURCES, INC.  
Debtor

Case No. 09-77791  
(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO.					X	350.60
ALL ISLAND IRRIGATION, INC 200 CENTRAL AVENUE FARMINGDALE, NY						
ACCOUNT NO.					X	0.00
ALPASO, LLC 201 MORELAND ROAD HAUPPAUGE, NY 11788						
ACCOUNT NO.						0.00
AMERICAN COLLEGE OF RADIOLOGY 1891 PRESTON WHITE DRIVE RESTON, VA						
ACCOUNT NO.						21,087.50
ASD HEALTHCARE PO BOX 848104 DALLAS, TX						

9 Continuation sheets attached

Subtotal >	\$	21,438.10
Total >	\$	

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable on the Statistical  
Summary of Certain Liabilities and Related Data.)

In re **MRI RESOURCES, INC.**

Debtor

Case No. **09-77791**

(If known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO.							351.85
<b>ASTARITA ASSOCIATES INC.</b> <b>414 ROUTE 111</b> <b>SMITHTOWN, NY</b>							
ACCOUNT NO.							249.01
<b>BANYAN INTERNATIONAL CORP</b> <b>2118 EAST INTERSTATE 20</b> <b>PO BOX 1779</b> <b>ABILENE, TX 79604</b>							
ACCOUNT NO.							1,789.59
<b>BETHPAGE MEDICAL BUILDING</b> <b>C/O BETHPAGE PROF. CTR.</b> <b>25 EAST SPRING VALLEY AVE</b> <b>SUITE 280</b> <b>MAYWOOD, NJ 07607</b>							
ACCOUNT NO.							11.25
<b>BETHPAGE WATER DISTRICT</b> <b>25 ADAMS STREET</b> <b>BETHPAGE, NY 11714</b>							
ACCOUNT NO.							1,505.36
<b>CATAPANO'S GOURMET ITALIAN MARKET</b> <b>326 BROADWAY</b> <b>BETHPAGE, NY 11714</b>							

Sheet no. 1 of 9 continuation sheets attached to Schedule of Creditors  
Holding Unsecured  
Nonpriority Claims

Subtotal > \$ **3,907.06**

Total &gt; \$

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable on the Statistical  
Summary of Certain Liabilities and Related Data.)

In re MRI RESOURCES, INC.  
Debtor

Case No. 09-77791  
(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO.						171.50
CLAIRSOL INC. 16 WERNICK PLACE SUITE C METUCHEN, NJ 08846						
ACCOUNT NO.						16,321.72
CONFIRMA INC 11040 MAIN STREET SUITE 100 BELLEVUE, WA						
ACCOUNT NO.						4,026.47
DECCAID SERVICES 94J JEF RYN BLVD DEER PARK, NY 11729						
ACCOUNT NO.						420,488.46
GE HEALTHCARE FINANCIAL SER.						
ACCOUNT NO.						325.31
GE MEDICAL SYSTEMS PO BOX 96483 CHICAGO, IL						

Sheet no. 2 of 9 continuation sheets attached to Schedule of Creditors  
Holding Unsecured  
Nonpriority Claims

Subtotal > \$ 441,333.46

Total >

\$

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable on the Statistical  
Summary of Certain Liabilities and Related Data.)

In re MRI RESOURCES, INC.  
Debtor

Case No. 09-77791  
(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO.						408.27
GENERAL SECURITY PO BOX 329 PLAINVIEW, NY 11803-0329						
ACCOUNT NO.						0.00
HITACHI CAPITAL AMERICA CORP. 21925 NETWORK PLACE LEASE # 30329-001 CHICAGO, IL						
ACCOUNT NO.						16,293.76
HITACHI MEDICAL SYSTEMS 1959 SUMMIT COMMERCE PARK ATTN: GAY WYNN TWINSBURG, OH						
ACCOUNT NO.						34,810.79
HOLOGIC INC. 24506 NETWORK PLACE CHICAGO, IL						
ACCOUNT NO.						0.00
JAMES J. STEFANICH						

Sheet no. 3 of 9 continuation sheets attached to Schedule of Creditors  
Holding Unsecured  
Nonpriority Claims

Subtotal > \$ 51,512.82

Total >

\$

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable on the Statistical  
Summary of Certain Liabilities and Related Data.)

In re **MRI RESOURCES, INC.**

Debtor

Case No. **09-77791**

(If known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO.							11,623.34
JEFFERSON MEDICAL & IMAGING 5470 BERKSHIRE VALLEY RD OAK RIDGE, NJ							
ACCOUNT NO.							76.04
KAYCEEDEE RESEARCH 1 WINDWARD COURT DIX HILLS, NY 11746							
ACCOUNT NO.							2,054.00
LI YELLOW CAB CORP. 100 NEW SOUTH ROAD HICKSVILLE, NY							
ACCOUNT NO.							9,743.05
LIPA PO BOX 9039 HICKSVILLE, NY 11802							
ACCOUNT NO.							642.13
LOYAL BUSINESS MACHINES 980 SUNRISE HIGHWAY W.BABYLON, NY							

Sheet no. **4** of **9** continuation sheets attached to Schedule of Creditors  
Holding Unsecured  
Nonpriority Claims

Subtotal > \$ **24,138.56**

Total &gt; \$

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable on the Statistical  
Summary of Certain Liabilities and Related Data.)



In re MRI RESOURCES, INC.  
Debtor

Case No. 09-77791  
(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO.						1,350.00
LUCY DITIZIO 33 VIRGINIA AVENUE PLAINVIEW, NY						
ACCOUNT NO.						25.00
MASTERS MECHANICAL CORP. 75 VERDI STREET FARMINGDALE, NY						
ACCOUNT NO.						30.00
MEDIFAX-EDI LLC 13093 COLLECTIONS CTR DR. CHICAGO, IL 60693						
ACCOUNT NO.						685.85
MEDLINE INDUSTRIES, INC. ATTENTION:ANNE KISHA ONE MEDLINE PLACE MUNDELEIN, IL 60060						
ACCOUNT NO.						10,088.38
MEDRAD INC. PO BOX 360172 PITTSBURGH, PA						

Sheet no. 5 of 9 continuation sheets attached to Schedule of Creditors  
Holding Unsecured  
Nonpriority Claims

Subtotal >	\$ 12,179.23
Total >	\$

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable on the Statistical  
Summary of Certain Liabilities and Related Data.)

In re **MRI RESOURCES, INC.**

Debtor

Case No. **09-77791**

(If known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO.  <b>MERGE TECHNOLOGIES, INC.</b> <b>6737 W. WASHINGTON STREET</b> <b>SUITE 2250</b> <b>MILWAUKEE, WI</b>							<b>3,691.08</b>
ACCOUNT NO.  <b>MONARCH IMAGING SERVICES INC</b> <b>101 ELLIS STREET</b> <b>STATEN ISLAND, NY 10307</b>							<b>2,000.00</b>
ACCOUNT NO.  <b>NATIONAL GRID</b> <b>PO BOX 9037</b> <b>HICKSVILLE, NY 11802</b>							<b>18.12</b>
ACCOUNT NO.  <b>NEW HORIZONS COMMUNICATIONS</b> <b>420 BEDFORD ST</b> <b>SUITE 250</b> <b>LEXINGTON, MA 02420</b>							<b>2,231.07</b>
ACCOUNT NO.  <b>OFFICE DEPOT</b> <b>PO BOX 633211</b> <b>CINCINNATI, OH</b>							<b>4,076.92</b>

Sheet no. 6 of 9 continuation sheets attached to Schedule of Creditors  
Holding Unsecured  
Nonpriority Claims

Subtotal > \$ **12,017.19**

Total &gt; \$

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable on the Statistical  
Summary of Certain Liabilities and Related Data.)

In re MRI RESOURCES, INC.  
Debtor

Case No. 09-77791  
(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i>	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO.						1,550.29
PATCHOGUE PRINTING INC. 23 HAVENS AVENUE PATCHOGUE, NY						
ACCOUNT NO.						1,720.88
PHYSICIAN SALES & SERVICE INC. 208 PASSAIC AVENUE FAIRFIELD, NJ						
ACCOUNT NO.						786.50
PUBLIC STORAGE INC. 4040 HEMPSTEAD TPKE. BETHPAGE, NY						
ACCOUNT NO.						1,384.96
SB LANDSCAPING 811 BROMPTON DRIVE WESTBURY, NY						
ACCOUNT NO.						81,553.00
SONIX MEDICAL RESOURCES		INTERCOMPANY LOAN				

Sheet no. 7 of 9 continuation sheets attached to Schedule of Creditors  
Holding Unsecured  
Nonpriority Claims

Subtotal >	\$ 86,995.63
Total >	\$

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable on the Statistical  
Summary of Certain Liabilities and Related Data.)

In re MRI RESOURCES, INC.  
Debtor

Case No. 09-77791  
(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO.						704.78
ST. JOHN COMPANIES, INC PO BOX 51263 LOS ANGELES, CA						
ACCOUNT NO.						1,561.28
STERICYCLE PO BOX 9001590 LOUISVILLE, KY 40290						
ACCOUNT NO.						322.62
SUBURBAN EXTERMINATING SVC INC. 879 JERICO TPKE SMITHTOWN, NY						
ACCOUNT NO.						650.00
TOTOWA SYSTEMS INC. PO BOX 696 TOTOWA, NJ						
ACCOUNT NO.						146.53
WATERBOY INC. PO BOX 11235 HAUPPAUGE, NY 11788						

Sheet no. 8 of 9 continuation sheets attached to Schedule of Creditors  
Holding Unsecured  
Nonpriority Claims

Subtotal	>	\$	3,385.21
Total	>	\$	

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable on the Statistical  
Summary of Certain Liabilities and Related Data.)

In re MRI RESOURCES, INC.  
Debtor

Case No. 09-77791  
(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i>	CODEBTOR	HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO.							3,060.27
WB MASON CO IN 21 COMMERCE DRIVE ATTN: JULIO CARRERAS CRANBURY, NJ							
ACCOUNT NO.							1,077.62
WINTER BROS RECYCLING 1198 PROSPECT AVENUE WESTBURY, NY 11590							

Sheet no. 9 of 9 continuation sheets attached to Schedule of Creditors  
Holding Unsecured  
Nonpriority Claims

Subtotal >	\$	4,137.89
Total >	\$	661,045.15

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable on the Statistical  
Summary of Certain Liabilities and Related Data.)

In re: MRI RESOURCES, INC.  
DebtorCase No. 09-77791  
(If known)**SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES**☐ Check this box if debtor has no executory contracts or unexpired leases.

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE, OF OTHER PARTIES TO LEASE OR CONTRACT.	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST, STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.
ALPASO, LLC 201 MORELAND ROAD HAUPPAUGE, NY 11788	COMMERCIAL LEASE
BETHPAGE MEDICAL BUILDING CO, C/O BETHPAGE PROF. CTR. 25 EAST SPRING VALLEY AVE SUITE 280 MAYWOOD, NJ 07607	COMMERCIAL LEASE
GE HEALTHCARE FINANCIAL SERVICES	GE 1.5 HD EXCITE 8 CHANNEL MR SYSTEM
GE HEALTHCARE FINANCIAL SERVICES	LHI ON CLOSED MRI
HITACHI CAPITAL AMERICA C 21925 NETWORK PLACE CHICAGO, IL	CONFIRMA CADSTREAM D V4.1 SYSTEM

In re: **MRI RESOURCES, INC.**

Debtor

Case No. **09-77791**

(If known)

**SCHEDULE H - CODEBTORS**☐ Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
<b>ADVANCED HEALTHCARE RESOU</b> <b>C/O SONIX MEDICAL RES.</b> <b>HAUPPAUGE, NY 11788</b>  <b>BRICK RESOURCES</b> <b>C/O SONIX MEDICAL REOURCE</b> <b>HAUPPAUGE, NY 11788</b>  <b>BROOKLYN 49TH STREET RES.</b> <b>C/O SONIX MEDICAL RES.</b> <b>HAUPPAUGE, NY 11788</b>  <b>CHATHAM MEDICAL RESOURCES</b> <b>C/O SONIX MEDICAL RES.</b> <b>HAUPPAUGE, NY 11788</b>  <b>CHATMONHAD RESOURCES</b> <b>C/O SONIX MEDICAL RES</b> <b>HAUPPAUGE, NY 11788</b>  <b>ENGLEWOOD RESOURCES</b> <b>C/O SONIX MEDICAL RES.</b> <b>HAUPPAUGE, NY 11788</b>  <b>QKSI RESOURCES, INC.</b> <b>C/O SONIX MEDICAL RES.</b> <b>HAUPPAUGE, NY 11788</b>  <b>SONIX MEDICAL RESOURCES</b> <b>150 MOTOR PARKWAY</b> <b>HAUPPAUGE, NY 11788</b>  <b>STONY ACQUISITIONS, INC.</b> <b>C/O SONIX MEDICAL RES.</b> <b>HAUPPAUGE, NY 11788</b>	<b>CIT HEALTHCARE LLC</b> <b>AS ADMINISTRATIVE AGENT</b> <b>305 FELLOWSHIP RD</b> <b>SUITE 300</b> <b>MOUNT LAUREL, NJ 08054</b>
<b>ADVANCED HEALTHCARE RESOU</b> <b>201 MORELAND RD, STE 1</b> <b>HAUPPAUGE, NY 11788</b>  <b>BRICK RESOURCES INC.</b> <b>455 JACK MARTIN BLVD.</b> <b>BRICK, NJ 08724</b>  <b>MEDVANCE RESOURCES, INC.</b> <b>430 E. 59TH STREET</b> <b>NEW YORK, NY 10022</b>  <b>SOUTH MEDICAL RESOURCES,</b> <b>7001 113TH STREET, APT 1-</b> <b>FOREST HILLS, NY 11375</b>	<b>DVI CAPITAL COMPANY</b> <b>6611 ROCKSIDE RD</b> <b>SUITE 110</b> <b>INDEPENDENCE, OH 44131</b>

In re: **MRI RESOURCES, INC.**

Debtor

Case No. **09-77791**

(If known)

**SCHEDULE H - CODEBTORS**☐ Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
<b>STONY ACQUISITIONS, INC.</b> <b>1500 NESCONSET HWY</b> <b>STONY BROOK, NY 11790</b>  <b>TOM'S RIVER RESOURCES, IN</b> <b>MULE RD</b> <b>TOMS RIVER, NJ 08755</b>	<b>DVI CAPITAL COMPANY</b> <b>6611 ROCKSIDE RD</b> <b>SUITE 110</b> <b>INDEPENDENCE, OH 44131</b>
<b>ADVANCED HEALTHCARE RESOU</b> <b>201 MORELAND RD</b> <b>HAUPPAUGE, NY 11788</b>  <b>BRICK RESOURCES, INC.</b> <b>455 JACK MARTIN BLVD</b> <b>BRICK, NJ 08724</b>  <b>MEDVANCE RESOURCES, INC.</b> <b>430 E. 59TH STREET</b> <b>NEW YORK, NY 10022</b>  <b>SOUTH MEDICAL RESOURCES,</b> <b>7001 113TH STREET,APT 1-J</b> <b>FOREST HILLS, NY 11375</b>  <b>STONY ACQUISITIONS, INC.</b> <b>1500 NESCONSET HWY</b> <b>STONY BROOK, NY 11790</b>  <b>TOM'S RIVER RESOURCES</b> <b>19 MULE RD</b> <b>TOMS RIVER, NJ 08755</b>	<b>ROCKFORD INDUSTRIES, INC.</b> <b>1851 E. 1ST STREET</b> <b>SUITE 600</b> <b>SANTA ANA, CA 92705</b>



In re MRI RESOURCES, INC.

Debtor

Case No. 09-77791

(If known)

## DECLARATION CONCERNING DEBTOR'S SCHEDULES

### DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

(NOT APPLICABLE)

### DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

I **JOHN J. COLBERT**, the **VICE PRESIDENT** of the **Corporation** named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 24 sheets (Total shown on summary page plus 1), and that they are true and correct to the best of my knowledge, information, and belief.

Date \_\_\_\_\_

Signature: \_\_\_\_\_

**JOHN J. COLBERT VICE PRESIDENT**

[Print or type name of individual signing on behalf of debtor.]

[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]

**United States Bankruptcy Court  
Eastern District of New York**

In re: **MRI RESOURCES, INC.**

Case No. **09-77791**

**List of Equity Security Holders**

REGISTERED NAME OF HOLDER OF SECURITY LAST KNOWN ADDRESS OR PLACE OF BUSINESS	CLASS OF SECURITY	NUMBER REGISTERED	KIND OF INTEREST REGISTERED
<b>SONIX MEDICAL RESOURCES</b>			<b>100%</b>

**DECLARATION UNDER PENALTY OF PERJURY  
ON BEHALF OF A CORPORATION OR PARTNERSHIP**

I, **JOHN J. COLBERT, VICE PRESIDENT** of the Corporation named as the debtor in this case, declare under penalty of perjury that I have read the foregoing List of Equity Security Holders and that it is true and correct to the best of my information and belief.

Date: \_\_\_\_\_

  
\_\_\_\_\_  
**JOHN J. COLBERT, VICE PRESIDENT**  
Debtor

Penalty for making a false statement or concealing property. Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18  
U.S.C §§ 152 and 3571.

**UNITED STATES BANKRUPTCY COURT**  
**Eastern District of New York**

In re: **MRI RESOURCES, INC.**Case No. **09-77791**

Debtor

(If known)

**STATEMENT OF FINANCIAL AFFAIRS**

**1. Income from employment or operation of business**

None ☐ State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT	SOURCE	FISCAL YEAR PERIOD
2,347,090.00	INCOME FROM OPERATIONS	01/01/07-12/31/07
2,280,060.00	INCOME FROM OPERATIONS	01/01/08-12/31/08
1,614,210.00	INCOME FROM OPERATIONS YEAR TO DATE	01/01/09-09/30/09

**2. Income other than from employment or operation of business**

None ☒ State the amount of income received by the debtor other than from employment, trade, profession, operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT	SOURCE	FISCAL YEAR PERIOD
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**3. Payments to creditors****Complete a. or b., as appropriate, and c.**

None ☒ a. *Individual or joint debtor(s) with primarily consumer debts:* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATES OF PAYMENTS	AMOUNT PAID	AMOUNT STILL OWING
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- None ☐ b. *Debtor whose debts are not primarily consumer debts:* List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,475. If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATES OF PAYMENTS/ TRANSFERS	AMOUNT PAID OR VALUE OF TRANSFERS	AMOUNT STILL OWING
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TO BE PROVIDED BY SONIX

- None ☐ c. *All debtors:* List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR	DATE OF PAYMENT	AMOUNT PAID	AMOUNT STILL OWING
ALPASO LLC OM SONI PRESIDENT OF THE DEBTOR OWNS AN INTEREST IN ALPASO LLC		34,322.15	

#### 4. Suits and administrative proceedings, executions, garnishments and attachments

- None ☐ a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER	NATURE OF PROCEEDING	COURT OR AGENCY AND LOCATION	STATUS OR DISPOSITION
CIT HEALTHCARE LLC V. SONIX MEDICAL RESOURCES, INC.,MRI RESOURCES, INC.,TOMS RIVER RESOURCES, INC. STONY ACQUISITIONS, INC.,SONIC MANAGEMENT RESOURCES, INC. CHATMANHAD RESOURCES, INC. QKSI RESOURCES, INC., BROOKLYN 49TH STREET RESOURCES, INC., ENGLEWOOD RESOURCES, INC. CHATHAM MEDICAL RESOURCES, INC., BRICK RESOURCES, INC.	BREACH OF CONTRACT	NYS SUPREME NEW YORK COUNTY	

- None ☒ b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED	DATE OF SEIZURE	DESCRIPTION AND VALUE OF PROPERTY
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## 5. Repossessions, foreclosures and returns

None



List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER	DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN	DESCRIPTION AND VALUE OF PROPERTY
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## 6. Assignments and receiverships

None



a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE	DATE OF ASSIGNMENT	TERMS OF ASSIGNMENT OR SETTLEMENT
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None



b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN	NAME AND ADDRESS OF COURT CASE TITLE & NUMBER	DATE OF ORDER	DESCRIPTION AND VALUE OF PROPERTY
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## 7. Gifts

None



List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION	RELATIONSHIP TO DEBTOR, IF ANY	DATE OF GIFT	DESCRIPTION AND VALUE OF GIFT
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## 8. Losses

None



List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case or **since the commencement of this case**. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY	DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS	DATE OF LOSS
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## 9. Payments related to debt counseling or bankruptcy

- None ☒ List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE	DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
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## 10. Other transfers

- None ☒ a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR	DATE	DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED
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- None ☒ b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER DEVICE	DATE(S) OF TRANSFER(S)	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR' INTEREST IN PROPERTY
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## 11. Closed financial accounts

- None ☐ List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION	TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE	AMOUNT AND DATE OF SALE OR CLOSING
STATE BANK OF LONG ISLAND 740 VETERANS MEMORIAL HWY HAUPPAUGE, NY 11788	CHECKING ACCOUNT 0917018752	4TH QTR. 2008

## 12. Safe deposit boxes

- None ☒ List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY	NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY	DESCRIPTION OF CONTENTS	DATE OF TRANSFER OR SURRENDER, IF ANY
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**13. Setoffs**

None ☒ List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATE OF SETOFF	AMOUNT OF SETOFF
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**14. Property held for another person**

None ☒ List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER	DESCRIPTION AND VALUE OF PROPERTY	LOCATION OF PROPERTY
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**15. Prior address of debtor**

None ☒ If debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS	NAME USED	DATES OF OCCUPANCY
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**16. Spouses and Former Spouses**

None ☒ If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

**17. Environmental Information.**

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law.

None ☒ a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law.

SITE NAME AND ADDRESS	NAME AND ADDRESS OF GOVERNMENTAL UNIT	DATE OF NOTICE	ENVIRONMENTAL LAW
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- None ☒ b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

SITE NAME AND ADDRESS	NAME AND ADDRESS OF GOVERNMENTAL UNIT	DATE OF NOTICE	ENVIRONMENTAL LAW
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- None ☒ c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT	DOCKET NUMBER	STATUS OR DISPOSITION
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### 18. Nature, location and name of business

- None ☒ a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within the **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within the **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within the **six years** immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the business, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within the **six years** immediately preceding the commencement of this case.

NAME	LAST FOUR DIGITS OF SOCIAL SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN	ADDRESS	NATURE OF BUSINESS	BEGINNING AND ENDING DATES
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- None ☒ b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME	ADDRESS
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### 19. Books, records and financial statements

- None ☒ a. List all bookkeepers and accountants who within **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS	DATES SERVICES RENDERED
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- None ☒ b. List all firms or individuals who within **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME	ADDRESS	DATES SERVICES RENDERED
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- None ☐ c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME

ADDRESS

**SONIX MEDICAL RESOURCES**

- None ☐ d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within **two years** immediately preceding the commencement of this case.

NAME AND ADDRESS

DATE ISSUED

CIT

**MERRILL LYNCH****20. Inventories**

- None ☒ a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY

INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY  
(Specify cost, market or other basis)

- None ☒ b. List the name and address of the person having possession of the records of each of the inventories reported in a., above.

DATE OF INVENTORY

NAME AND ADDRESSES OF CUSTODIAN  
OF INVENTORY RECORDS**21. Current Partners, Officers, Directors and Shareholders**

- None ☒ a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS

NATURE OF INTEREST

PERCENTAGE OF INTEREST

- None ☐ b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS

TITLE

NATURE AND PERCENTAGE  
OF STOCK OWNERSHIPJAMES FRAZZETTA  
150 MOTOR PARKWAY  
HAUPPAUGE, NY 11788

SECRETARY

JOHN COLBERT  
150 MOTOR PARKWAY  
HAUPPAUGE, NY 11788

VICE-PRESIDENT

OM P. SONI  
150 MOTOR PARKWAY  
HAUPPAUGE, NY 11788

PRESIDENT

SONIX MEDICAL RESOURCES  
150 MOTOR PARKWAY  
HAUPPAUGE, NY 11788

100%

**22. Former partners, officers, directors and shareholders**None  
☒

a. If the debtor is a partnership, list each member who withdrew from the partnership within one year immediately preceding the commencement of this case.

NAME

ADDRESS

DATE OF WITHDRAWAL

None  
☒

b. If the debtor is a corporation, list all officers or directors whose relationship with the corporation terminated within one year immediately preceding the commencement of this case.

NAME AND ADDRESS

TITLE

DATE OF TERMINATION

**23. Withdrawals from a partnership or distributions by a corporation**None  
☒

If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during one year immediately preceding the commencement of this case.

NAME & ADDRESS  
OF RECIPIENT,  
RELATIONSHIP TO DEBTORDATE AND PURPOSE  
OF WITHDRAWALAMOUNT OF MONEY  
OR DESCRIPTION  
AND VALUE OF PROPERTY**24. Tax Consolidation Group.**None  
☐

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within six years immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION  
SONIX INC.

TAXPAYER IDENTIFICATION NUMBER (EIN)

**25. Pension Funds.**None  
☒

If the debtor is not an individual, list the name and federal taxpayer identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within six years immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

\*\*\*\*\*

*[If completed on behalf of a partnership or corporation]*

I, declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct to the best of my knowledge, information and belief.

Date

Signature

JOHN J. COLBERT, VICE PRESIDENT

Print Name and Title

[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]

\_\_\_\_\_ continuation sheets attached

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. § 152 and 3571.